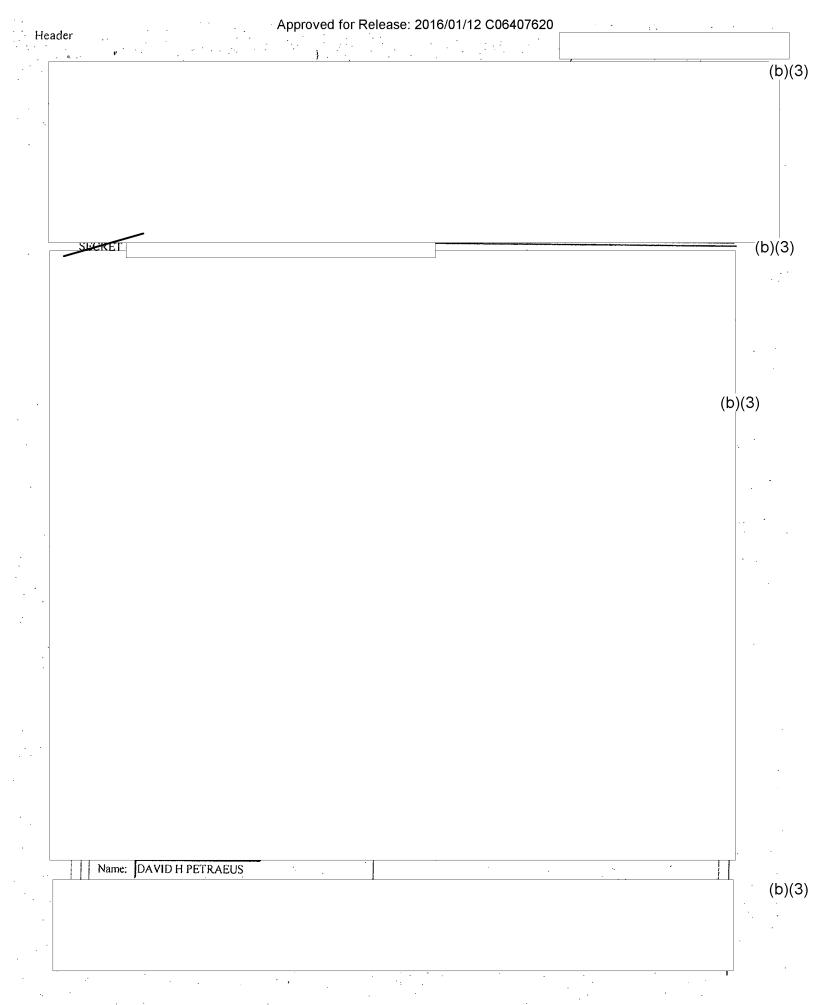
	US Classification//Non US//SCI//Codeword/FGI//Dissem Controls//Non-Intell//Declass (as appropriate)
	General Voucher
Please read Privacy	Act Statement on page 2 before completeing this form
ECTION 1	Name (Last, First, MI)  Security File No. or Securi
CLAIMANT	DCIA Petraeus, David H.  Security File No. or Sain Office Room and Building Extensi
	Reimbursements CIA/DIR/DCIA N/A
	I certify that the disbursements itemized were necessarily made by me on official business and that I have not been nor will I be reimbursed therefor from any other source and that this claim of duties in accordance with the terms of the payer's control as the
	& attachments are true and correct. The receipts required per regulations are attached.  **The receipts required per regulations are attached.**  **The receipts requ
	Date Signature of Claimant
·	Advance Information Total Advanced
SECTION 2	Type of Disbursement To Transalyoe Amount Due from Employee
DISBURSMENT	Mount Owed to Employee
TYPE AND ADVANCE INFO	No. Cashiza
	Required field on Serven, fill with 0.00 when hot used
	Who: DCIA David H. Petraeus    Description (Use page 2 for additional space)   Amount
SECTION 3	What: Manual travel accounting voucher for official travel to New York, New York
DESCRIPTION	When: 10-12 November 2011 Where: New York, New York
Who, What, When, Where,	Why: Manual travel accounting voucher to reimburse DCIA David H. Petraeus for official travel to New York, New York, 10-12 November 2011,
and Why must . be stated -	to participate in New York City's Veterans Day Parade and to conduct official business on behalf of the USG.
	TOTAL: AMOUNT (Pages: 1 and 2) 38.3
SECTION 4 AUTHORIZATIONS	Data ( , , )
	Acknowledgement of Receipt of Funds  Designation of Agent to Pick Up Funds
SECTION 5	acknowledge receipt of funds in the amount of S. Jauthorize my goest whose signstrue. Date
RECEIPT OF	to be used for the purpose stated and accounted for as shown above.    Signature of Claimant   Badge No.   Signature of Claimant   Signature of Claima
FUNDS	THYSTORIC Funds on my behalf and acknowledge Pade Signature of Claimant Badge No.  Signature of Claimant Badge No.
SECTIONS	agent.
SECTION 6 OBLIGATION REF	
	A 11/1/2014
ORM 14442	2000 137 037 037 0 099 0 - AJ
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	TO VICE THE REPORT OF THE PARTY AND THE PART			
ocial Security Number (S	w 93-579 arequires that Federal agencies info SN) whether the disclosure is mandatory or w	rmundividuals when they are asked oluntary, by what authority suchinum	o provide their	
vilat uses will be made of s.Executive Order 9397.	w 95.5 (%) arequires man federal agencies into SN) whether the disclosure is mandatory only the SSN picture is mandatory only the SSN picture by your of your SSN on the SSN is used as an identifier in processing with the individual and the eror e provide for with the individual and the eror e provide for a significant of the second control of the sec	histormis mandatory The authority	dorthis solicitation	,
ne association of the data	With the rindividual and the refore provide for a	courate financial record keeping		
colo confirmed with Asset Col	Description		Amount	
eals confirmed with Agent in Ch	arge and Executive Assistant. Lodging paid by	OCIA Executive Assistant.		(b
<u> </u>			· .	
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			· · · · · · · · · · · · · · · · · · ·	
Please	Include Subtotal on the Front of the Vouch	er Subtotal		
PRM 4442 -10				(b)
	SECRET		,	. ` ′

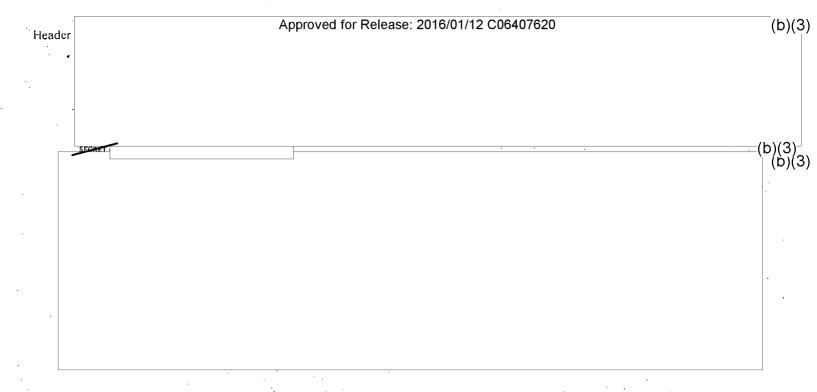


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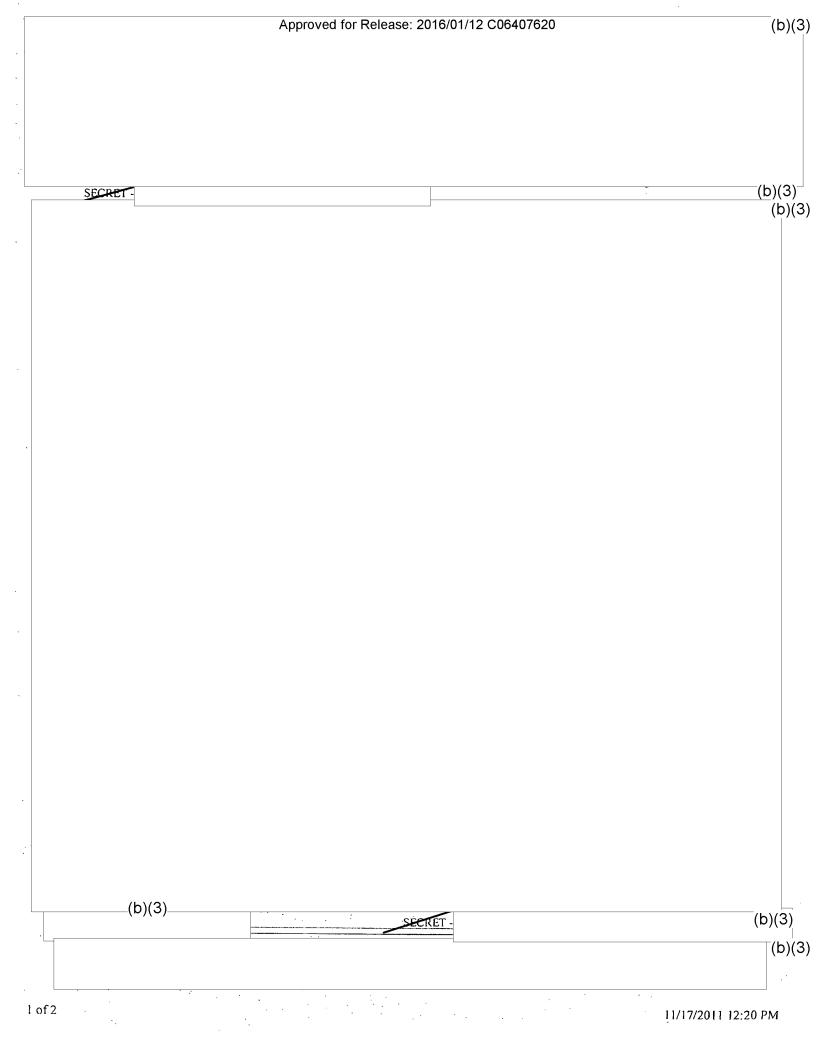
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## DCIA David H. Petraeus

TDY location: New York, New York TDY dates: 10-12 November 2011

New York, New York, M&IE (\$71) = Breakfast (\$12), Lunch (\$18), Dinner (\$36), Incidentals (\$5)

(b)(1) (b)(3)

11/10/2011 11/11/2011

11/12/2011

75% 100% Less: 1 Lunch provided on the official aircraft

Less: N/A

75%

Less: 1 Breakfast provided on the official aircraft

35.25

71.00

(b)(3)

41.25

\$ 147.50

(\$82.54)

(\$26.61)

Total due to Traveler



Information Posted : Effective Start Date : Season Start :

10/03/2011 10/01/2011 10/01

Information Updated : Effective End Date : Season End :

10/03/2011

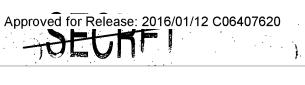
12/31

State:	NEW YORK				•
City	County and/or Other Defined Location	Maximum Lodging Amount	M&IE Rate	Maximum Per Diem	(b)(3
Seasonal Dates: 10/01	- 12/31_		· · · · · · · · · · · · · · · · · · ·		
GMT Offset:					(b)(3
Comments:					
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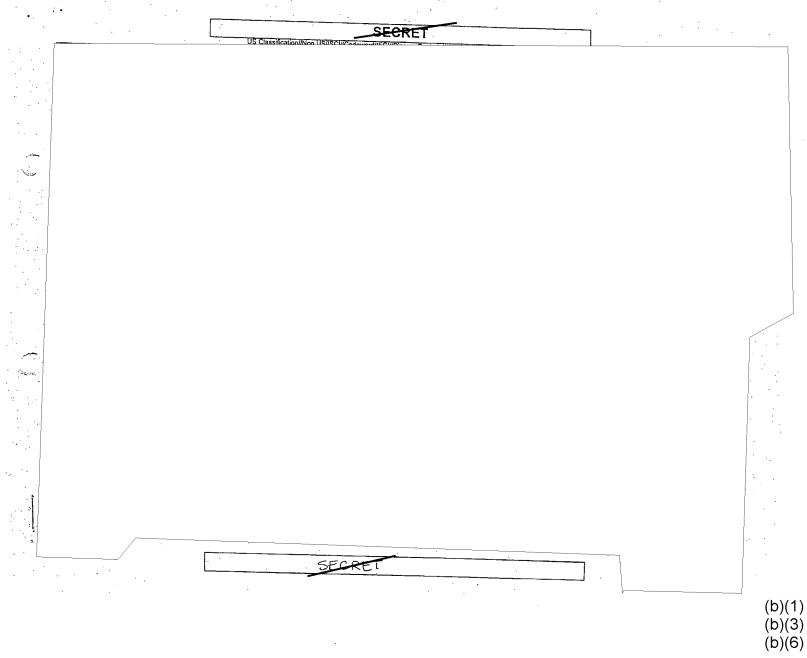


(b)(3) (b)(1)

(b)(1)<sup>2</sup> (b)(3)

		· * _ *		(b)(6 (b)(3
				(b)(3 (b)(6
	Other info: Restrooms, coffee, drinks, snacks, etc are available at the termina	1.	•	(b)(3)
				(b)(3
	Passengers for this flight:	_		(b)(3)
	David P. (VIP) Holly P. (Mrs. VIP)	(k	o)(3) o)(6)	
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